

All transactions to be conducted by you with or through the Bank shall be subject to the terms and conditions of this account application and the Private Banking Agreement. By signing this application, I agree that I have received a copy of the Private Banking Agreement and that I have read and understand the terms.

Signed, Sealed and Delivered By All Applicants

X [Signature]
First Name Reshmi Patel
X VANDANA DEVI PATEL
First Name V.K. Patel
X [Signature]
First Name [Signature]
X [Signature]
First Name [Signature]
Date 14/4/04

Signed for American Express Bank Ltd.

Thank you for establishing an account with American Express Bank Ltd., Singapore. The General Banking and Investment services are immediately available.

Availability of Foreign Exchange and Credit Services will be as advised to you by American Express Bank Ltd., Singapore from time to time.

to the signature of the Officer

X [Signature]
First Name C.H. Isaacson
Date 14/4/04
X [Signature]
First Name [Signature]
Date 14/4/04

LETTER OF AUTHORITY - SPECIMEN SIGNATURE AND SIGNING INSTRUCTION

The Bank is hereby authorized to accept written instructions from the following authorized signatories given in the manner specified below concerning the operation of all of my Accounts and all other matters as provided for in this document between the Bank and me. This authority is to remain in full force and binding upon me until rescinded by the Bank or written instructions from me to the contrary.

General Authority to Sign	AMERICAN EXPRESS BANK LTD	SIGNATURE CARD
(1) To sign all cheques, drafts, transfers, etc.	(1) Title of Authorized Signatory	(1) Signature
(2) To sign all bank orders, etc.	(2) Title of Authorized Signatory	(2) Signature
(3) To sign all bank orders, etc.	(3) Title of Authorized Signatory	(3) Signature
(4) To sign all bank orders, etc.	(4) Title of Authorized Signatory	(4) Signature
(5) To sign all bank orders, etc.	(5) Title of Authorized Signatory	(5) Signature
(6) To sign all bank orders, etc.	(6) Title of Authorized Signatory	(6) Signature
(7) To sign all bank orders, etc.	(7) Title of Authorized Signatory	(7) Signature
(8) To sign all bank orders, etc.	(8) Title of Authorized Signatory	(8) Signature
(9) To sign all bank orders, etc.	(9) Title of Authorized Signatory	(9) Signature
(10) To sign all bank orders, etc.	(10) Title of Authorized Signatory	(10) Signature



Applicable law requires certain financial institutions to obtain, verify and record information that identifies each person who opens an account. When you apply for an account, we will ask for your name, address, date of birth, and other information that will allow us to verify your identity.

Private Bank Account Application

I hereby request to establish an account relationship with American Express Bank Ltd., Singapore. I agree to be bound by the terms and conditions of this application and the Private Banking Services Agreement.

The following services are available:

- | | |
|-----------------------------|------------------------------------|
| General Banking | Investments |
| Current Account | Security Advisory Service |
| Call Deposit | Custodian Service |
| Time Deposit | Securities Lending |
| Fiduciary Investments | Strategic Deposits |
| Deposit Currency Conversion | Prepaid Metals |
| | Discretionary Portfolio Management |

The Bank will advise you on the availability of Foreign Exchange and Credit Services.

- | | |
|---|------------------------|
| Foreign Exchange & Derivatives | Credit Services |
| Spot Foreign Exchange | Loans and Advances |
| Forward Foreign Exchange | Share Margin Trading |
| Foreign Exchange, Metal & Option Trading | Other Credit Services |
| Foreign Exchange Options | |

New Products and Services

The Bank may introduce and provide new services from time to time. The terms and conditions governing such services shall be notified in writing to the Customer. Failure to receive any such notification, as a result of hold mail instructions or otherwise, shall not invalidate them.

All signatures on the statement must sign the application inside X.

Personal Information

Name of Account RATNADEVA PATELPersonal Information
Redacted

Support Information

Name (provide copies of your passport)

Name RATNADEVA NationalityName RAJESH Nationality

Joint Accounts - Individual Accounts only

(Please indicate as appropriate)

All transactions to be conducted with or through the Bank (including the creation of any charge, mortgage or other commitment over any number or other property from time to time or recovery for the satisfaction of any claim in a court of law) and the execution of any agreement or supplement to this agreement must be authorized by the following signatures:

☒ ANY ONE of the individuals signing on this application

OR

☐ ANY TWO of the individuals signing on this application

OR

☐ ALL of the individuals signing on this application

OR

☐ OTHER (specify)

Bank References

Name of Bank ATTACHED LETTER

Full Address

Contact Person

Name of Bank

Full Address

Contact Person

American Express Bank Ltd. is hereby irrevocably and unconditionally authorized by you (the Customer) to contact the above banks in order to obtain any reference or other information required by the Bank (and for this purpose the Bank may make disclosure of such information or the Bank, in its sole discretion, consider it to be relevant for its purposes).

Telephone and Telefax Instructions

You authorize the Bank to accept your instructions in respect of any transaction by telephone and/or facsimile transmission in accordance with the terms of the Private Banking Services Agreement.

If you want this service all clients must sign below:

X RAJESHFirst Name RAJESHX V.K. PatelFirst Name V.K. PatelX RAJESHFirst Name RAJESHX RAJESH

Disclosure of Risk and Disclaimer

I confirm that I have read the notice entitled "Disclosure of Risk and Disclaimer" of the Private Banking Services Agreement and fully understand it.

X RAJESHFirst Name RAJESHX V.K. PatelFirst Name V.K. PatelX RAJESHFirst Name RAJESHX RAJESH

Hold Mail Instructions

You authorize the Bank to hold all savings orders relating to any account or transaction connected with the Bank until collected by you or in the case of a joint account by any one of you. The amount for each withdrawal will be as advised by the Bank from time to time.

If you want this service all clients must sign below:

X RAJESHFirst Name RAJESHX V.K. PatelFirst Name V.K. PatelX RAJESHFirst Name RAJESHX RAJESHFirst Name RAJESHX RAJESHFirst Name RAJESHX RAJESHFirst Name RAJESHX RAJESHFirst Name RAJESHX RAJESHFirst Name RAJESHX RAJESHFirst Name RAJESHX RAJESHFirst Name RAJESHX RAJESHFirst Name RAJESHX RAJESHFirst Name RAJESHX RAJESHFirst Name RAJESHX RAJESH